SUBMIT: COMPLETED APPLICATION, TAX.

APPLICATION FOR PERMIT

Permit #:

Shoreland — XLis	Is	Section 18,	1/4,	PROJECT Legs	Authorized Agent: (Person Si	Contractor: SCIF	55890 Wildeness C+	Don't Julie Verelius	Owner's Name:	DO NOT START CONSTRUCTION	INSTRUCTIONS: No permits will Checks are made pavable to: Ba	Washburn, WI 54891 (715) 373-6138	Bayfield County Planning and Zoning Depart. PO Box 58
X is Property/Land within 1000 feet of Lake, Pond or Flowage	Is Property/Land within 300 feet of River, Stream (incl. Intermittent)	, Township 45 N, Range 9	1/4 Gov't Lot Lot(s)	Legal Description: (Use Tax Statement)	Authorized Agent: (Person Signing Application on behalf of Owner(s))		derness Ct	e Verelius			INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.	54891	ming Depart.
ke, Pond or Flowage If yescontinue	er, Stream (incl. Intermittent)	W Town of B	CSM Vol & Page	04-004-J-45-09	Agent Phone: Ag		Barnes, W	5729 Og/Lley	Mailing Address:	SUED TO APPLICANT. SANITARY PRIVY CONDITIONAL USE	Bayfield Co. Zoning Dept.	DCT 17 2014	BAYHELD EOWNEY, WISCONSIN
Distance Structure is from Shoreline:	Distance Structure is from Shoreline:	Barnes	22-24 Block(s) No.	PIN: (23 digits) 04-004-J-4509-18-100-154-19000	Agent Mailing Address (include City/State/Zip):	Plumber:	I 54873	57290gldeySt Duloth, MN	- +			The state of the s	
* ;	*	Lot Size	Subdivision:	Recorded Volume_	1	·		3	82	□ SPECIAL USE □ B.D.A.	Refund:	Amount Paid:	Date:
Hoodplain Zone: ☐ Yes ☐ Xino ☐ No	→	Acreage N.S/S	Add to P.E.	Document: (i.e. Property Ownership)	Written Authorization Attached Pes Y No	Plumber Phone:	349-4995	Cell Phone: 218	8	OTHER		B15 10-17-14	10:30-14

\(\) is Property/Land within 1000 feet of Lake, Pond or Flowage if yes--continue

☐ Non-Shoreland									
Value at Time					-	ortonia de la companio del companio de la companio del companio de la companio della companio de la companio della companio de			
of Completion	Project	ect	# of Stories		ੂ ਪ੍ਰ‡	Wh Sewer/S	What Type of Sewer/Sanitary System		Water
donated time &			and/or basement	7	bedrooms	ls on t	Is on the property?		
3310cc1101	XNew Construction	struction	X 1-Story	☐ Seasonal	<u>1</u>	☐ Municipal/City			□ City
<u>,</u>	☐ Addition/Alteration	/Alteration	☐ 1-Story + Loft	💢 Year Round	□ 2	☐ (New) Sanitary	Specify Type:)	X Well
3 1, 500 T	☐ Conversion	on	□ 2-Story		□ 3	★ Sanitary (Exists) Spec) Specify Type:	C'DMU	<u></u>
	☐ Relocate (existing bldg)	(existing bldg)	□ Basement			☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	Vaulted (min	200 gallon)	
	☐ Run a Business on	siness on	No Basement		X None	☐ Portable (w/service co	/ice contract)		
	Property		☐ Foundation			☐ Compost Toilet			
A-Fr-Allithmentalities - J-Fr-		The state of the s	- In the second			□ None			
Existing Structure: (if permit being applied for is relevant to it)	: (if permit be	ing applied for	r is relevant to it)	Length:		Width:	Hei	Height:	
Proposed Construction:	ction:			Length:		width:	Height	ght:	
Proposed Use	·"			Proposed Structure	Ф		Dimensions		Square Footage
		Principal :	Principal Structure (first structure on property)	ture on property)			×		
		Residence	Residence (i.e. cabín, hunting shack, etc.	shack, etc.)			×		
ζ			with Loft	and the second s			×		manus and market and property and an artist and an artist and an artist and artist a
)se		with a Porch	ALL		THE PROPERTY OF THE PROPERTY O	×)	
			with (2 nd) Porch				×		
			with a Deck			- Control of the Cont	×	}	
			with (2 nd) Deck	White the first section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a section in the second section in the second section is a section in the section in the section in the section is a section in the section in the section in the section is a section in the section in the section in the section is a section in the			×	_	
Commercial Use	Use		with Attached Garage	rage			×	_	
		Bunkhous	Bunkhouse w/ (□ sanitary, or □	☐ sleeping quarters, or		□ cooking & food prep facilities)	×	_	
		Mobile H	Mobile Home (manufactured date)	ite)	- Control of the Cont	The control of the co	×) }	
_	X	Addition/	Addition/Alteration (specify) 22 1	Davillon			0/x 0C)	Š Ž	8
Municipal Use	se	Accessory Building	Building (specify)			THE PARTY AND TH	×	_	
ANAMANI Site of the state of th		Accessory	Accessory Building Addition/Alteration (specify)	Alteration (specify)		under mandelle title blefter tra-	×)	
Rec'd for Issuance	Suance								
		Special Us	Special Use: (explain)	***************************************			(x)	
		Condition	Conditional Use: (explain)				(x		
		Other: (explain)	plain)				×	_	

HOLD TOLIDIA COLOR	-	Co		Hec'd for Issuance		□ IVIUNICIPAI USE □ Ac	X		Bu	☐ Commercial Use				Academical Cac
	Other: (explain)	Conditional Use: (explain)	Special Use: (explain)		Accessory Building Addition/Alteration (specify)	Accessory Building (specify)	Addition/Alteration (specify) $22\sqrt{1100}$	Mobile Home (manufactured date)	Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	with Attached Garage	with (2 nd) Deck	with a Deck	with (2 nd) Porch	Widiarcia
	^	-	~		^	_	36		_	_	_	_	(-
	×	×	×		×	x)	, x40)	×	×	×)	×	×	×	J
	www	Western Water State Co.					88	With the second				eren faren eren faren	-	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

| [(we) declare that this application (including any accompanying information) (we) as dearn many labeling and permit of the best of my (our) knowledge and belief it is true, correct and complete. | (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield Country in determining whether to issue a permit. | (we) further accept liability which may be a result of Bayfield Country relying on this information i (we) am (are) providing in or with this application. | (we) consent to country officials charged with administering country ordinances to have access to the above described property at any reasonable time for the purpose of inspection. -17-14

	Authorized Agent:
(If you are signing	

Address to send permit

Owner(s):X

Samo on behalf of the own Ω bove r(s) a letter of authorization must accompany this application)

Deed All Owners must sign or letter(s) of authorization

must accompany this application)

Date Date 10-

Attach

Copy of Tax Statement

Fryou recently purchased the property send your Recorded Deed

Ŧ [<u>S</u>	 <u>ک</u> د	<u> </u>	5 .	្រួត	-:	70	ا ح		3 S P	8 5 N N N	Ž Ž	N X	S S					
Hold For Sanitary:	Signature of Inspector:	Condition(s): Town, Committee or Board Conditions Attached?	Lettall	Was Pa as Proposed Build	Granted by Variance (B.O.A.) ☐ Yes X No	Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming	Permit #: 14-0415	Permit Denied (Date):	<u> </u>	Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setba one previously surveyed comer to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the promarked by a licensed surveyor, at the owner's expense. (a) Stake or Mark Proposed Location(s) of New Construction Sentic Tank (ST), Drain field (DE), Holding Tank (HT)	Setback to Septic Tank or Holding Tank Setback to Drain Field Setback to Privy (Portable, Composting) Prior to the placement or construction of a structure with other previously surveyed corner or marked by a licensed	Setback from the East Lot Line	Setback from the North Lot Line Setback from the South Lot Line	Setback from the Centerline of Platted Road Setback from the Established Right-of-Way	Description	Please complete (1) – ((8) Setback		(4) SHOW: (5) Show: (6) Show any (*): (7) Show any (*):	
d For TB/	welling I fin	tee or Board Conditions	set backs.	X Yes X Yes	Case #:	Lot	-1: 1:		NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code The local Town, Village, City, State or Federal agencies may also require permits. # of bedrooms: Sanitary Date:	construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible comer to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must veyor at the owner's expense. Stake or Mark Proposed Location(s) of New Construction Sentic Tank (ST). Drain field (DF). Holding Tank (HT). Privy (P) and Well (W)	to Septic Tank or Holding Tank to Drain Field to Privy (Portable, Composting) to Privy (Portable, Structure within ten (10) feet of the minim placement or construction of a structure within ten (10) feet of the minim placement or marked by a licensed surveyor at the owner's extructive surveyer at the owner's extructive surveye	tine LaKE	,	ne of Platted Road ned Right-of-Way	otion	complete (1) – (7) above (prior to continuing) (8) Setbacks: (measured to the closest point)			Show / Indicate: North Show Location of (*): (*) Dr Show:
Hold For	the state of the s	Attachéd? Yes No	Inchested by:	O No		(Deed of Record) (Fused/Contiguous Lot(s))	Permit Date:	Reason for Denial:	ermits Expire One (1) Yea e & Two Family Dwelling al Town, Village, City, Sta Sanitary Number:	er, or verifiable by the Departm	aet of the minimum required se the owner's expense.		1006		Measurement	inuing) losest point)	See	rell (W); (*) Septic Tan ke; (*) River; (*) Strea retlands; or (*) Slopes	North (N) on Flot Fian (*) Driveway <u>and</u> (*) Frontage Road (Name Frontage Road) All Evisting Structures on your Property
or Affidavit:		-(If No they need I		Were Prop	Previously Granted by	XNo Mitigation Required XNo Mitigation Attached	10-30-14	al:	aar from the Date of Iss ig: ALL Municipalities / tate or Federal agencie	feet from the minimum requirent by use of a corrected com	Feet Setback to Feet Feet Feet Feet Feet Feet Feet Feet						tach m	k (ST); (*) Drain Field im/Creek; or (*) Pond over 20%	age Road (Name Fron
Hold For Fees:		to be attached.)		Were Property Lines Represented by Owner Was Property Surveyed	anted by Variance (B.O.A.)	□ Yes			suance if Construction or Are Required To Enforce s may also require perm	red setback, the boundary line fr	Setback to Well boundary line from which the setback must be measured must be visit	Elevation of Floodplain	om Wetland	Setback from the Lake (ordinary high-water mark) Setback from the River, Stream, Creek Setback from the Bank or Bluff	Description	Changes in plans must be approved	Mc2+	(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	tage Road)
PI-MANAGEMENT CONTRACTOR CONTRACT	Date	Date of its	Zoning District Lakes Classifica Date of Re-Inc	by Owner 29 Yes Surveyed 29-Yes	#	o Affidavit Required o Affidavit Attached			Use has not begun. The Uniform Dwelling Coduts. Sanitary Date:	om which the setback must be measuns 500 feet of the proposed site of the proposed site of the care in	sured must be visible from one			high-water mark) Creek				(HT) and/or (*) Privy (P)	
	Date of Approval:	S. Haberton.	Zoning District $(\mathcal{K}\mathcal{A})$ Lakes Classification (\mathcal{S})	3		quired ☐ Yes 🕱 tached ☐ Yes 🕱			Code.	e measured must be visible fie of the structure, or must be	ne previously surveyed corner	NA X	426	# N # N/ # 00/	Measuremen	ed by the Planning & Zoning ((P)	



© Copyright 2008 ESRI. All rights reserved. Printed on Fri Oct 17 2014 09:15:03 AM.

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Barfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

	Bayfield Co. Zonling Dapp.	Date Highing (Received) OCT 152014	BAYFIELD EOUNE, IMISCENSIN	APPLICATION FOR PERMIT
`				
	Refund:	Amount Paid:	Date:	Permit #:
		\$185 10-15-14	10-30-14	14-0416
		_		

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. TYPE OF PERMIT REQUESTED-Existing Structure: (if permit being applied for is relevant to it) Proposed Construction: X Shoreland Authorized of Completion address of Property: donated time & Value at Time 💢 Residential Use 3<u>000</u> Non-Shoreland PROJECT LOCATION Rec'd for Municipal Use Commercial Use Proposed Use material * include Secretarial Staff Section ಧ೨ _1/4, XWX \bigcirc Issuanc $\bar{\sigma}$ ☐ Conversion X New Construction Kls Property/Land within 1000 feet of Lake, Pond or Flowage
If yes---continue ☐ Is Property/Land within 300 feet of River, Stream Creek or Landward side of Floodplain? If yes— Legal Description: Relocate (existing bldg)
Run a Business on Property Addition/Alteration , Township 1/4 Project Sunnar bore < X X LAND USE SANITARY PR られ Other: (explain) Special Use: (explain) ______
Conditional Use: (explain) Mobile Home (manufactured date) Residence (i.e. cabin, hunting shack, etc.) Principal Structure (first structure on property) Addition/Alteration Bunkhouse w/ (☐ sanitary, Accessory Building Addition/Alteration (specify) Accessory Building (Use Tax Statement) N, Range ★ 1-Story # of Stories and/or basement with a Deck with (2nd) Deck with a Porch with (2nd) Porch with Loft with Attached Garage Basement No Basement 2-Story 1-Story + Loft Foundation (specify) City/State/Zip:
City/State/Zip:
Contractor Phone: Plumber: (specify) PIN: (23 digits)
04-604-2-45-07-٤ Agent Phone: or □ sleeping quarters, or Proposed Structure Length: X Year Round Length: □ PRIVY (incl. continue Seasonal Use المراق ☐ CONDITIONAL USE | City/State/Zip: Ò Agent Wailing Address (include City/State/Zip): -80 Gorso 2 2 3 None Distance Structure is from Shoreline: $\begin{array}{c} OO + \\ \hline \end{array}$ feet Distance Structure is from Shoreline: bedrooms ☐ cooking & food prep facilities) 54873 400-Lot(s) No. 앜 Esko, 6 Width: Width: ☐ Compost Toilet

None Sanitary (Exists)
Privy (Pit) or Municipal/City (New) Sanitary Portable (w/service contract) Block(s) No 18000 ☐ SPECIAL USE 3 2 Sewer/Sanitary System ls on the property? Volume What Type of Lot Size Subdivision: 55733 Cherokee Recorded Docun feet Specify Type: R d Document: (i.e. Property Ow Dimensions Is Property in Floodplain Zone? B.O.A. DIHER SX \times \times × \times × × × ⊒ Yes ¥″No Height: Cell Phone: 2/8 Plumber Phone Radito Written Authorization 348-6883 Page(s) 182 m 40 Are Wetlands
Present?

Ves 360 Footage Square U Love ⊠ Yes X No Water Well اس

9 IO3433 Authorized Agent:

(If you are signing on behalf of the owner(s) a letter of authorization must accompany

this

application)

must sign or letter(s) of a

7 mm

accompany this application)

Date

10-14-

2

0

bout

Address to send permit

I (we) declare that this application (including any am fare) responsible for the detail and accuracy may be a result of Bayfield County relying on it above described property at any reasonable time

accompaints of all infor

re) providing and :) providing in or w

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES and complete. I (we) acknowledge that I (we) recompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) further accept liability which cy of all information (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which this information (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the

Date

Attach
Copy of Tax Statement V
the property send your Recorded Deed

Comment Comm
--